Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY CAMDEN VICINAGE	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself							
		About Debtor 1:	Abou	t Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's	Bonnie First name L.		First name				
	license or passport).	Middle name	Middl	e name				
	Bring your picture identification to your	Stintsman						
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last	ame and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity	Bonnie Lynn Stintsman						
	such as a corporation, partnership, or LLC that is not filing this petition.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6935						

De	btor 1 Bonnie L. Stints	man	Case number (if known)			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
4.	Your Employer Identification Number (EIN), if any.					
		EIN		EIN		
5.	Where you live			If Debtor 2 lives at a different address:		
		32 Melrose Drive Pine Hill, NJ 08021				
		Number, Street, City, State & ZIP Code		Number, Street, City, State & ZIP Code		
		Camden				
		County		County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:		Check one:		
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason.		☐ I have another reason. Explain, (See 28 U.S.C. § 1408.)		

7.	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by t</i> rage 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankruptcy box.		
	choosing to file under	☐ Cha _l	pter 7					
		☐ Chap	pter 11					
		☐ Chap	pter 12					
		■ Chapter 13						
3.	How you will pay the fee	— al or	out how y	ou may pay. Typic attorney is submi	ally, if you are paying the fee you	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or mone lf, your attorney may pay with a credit card or check with		
		□ Ir	need to pa	y the fee in insta		n, sign and attach the Application for Individuals to Pay		
					(Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may		
		bı ar	ut is not rec oplies to yo	quired to, waive your family size and	ur fee, and may do so only if you you are unable to pay the fee in	in income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out al Form 103B) and file it with your petition.		
	Have you filed for bankruptcy within the last 8 years?	■ No.						
	last o years.	— 103.	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No □ Yes.						
	affiliate?		Dobtor			Polationahin to you		
			Debtor District		When	Relationship to you Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
1.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has y	our landlord obtair	ned an eviction judgment against	you?		
		. 55.		No. Go to line 12	2.			
						udgment Against You (Form 101A) and file it as part of		

Case number (if known)

Debtor 1 Bonnie L. Stintsman

Deb	otor 1 Bonnie L. Stintsm	an			Case number (if known)				
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprieto	or				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	e and location of busi	ness				
	A sole proprietorship is a								
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	per, Street, City, State	e & ZIP Code				
	it to this petition.		Chec	k the appropriate box	to describe your business:				
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))				
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?	deadline	s. If you in	ndicate that you are a low statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small business debtor, see 11	■ No.	I am	not filing under Chapt	ter 11.				
	U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.				
		☐ Yes.		I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, an I choose to proceed under Subchapter V of Chapter 11.					
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or Any	Property That Needs Immediate Attention				
14	Do you own or have any		,	,	,				
	property that poses or is	No.							
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number Chrest City State 9 7 in Code				
					Number, Street, City, State & Zip Code				

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Den	Bonnie L. Stintsin	an			Case Hulliber (#				
Par	6: Answer These Quest	ions for Re	porting Purposes						
16.	What kind of debts do you have?	16a.	individual primarily for a pe	consumer debts? Consumer ersonal, family, or household p		in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		business debts? Business devestment or through the opera					
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c.	State the type of debts you owe that are not consumer debts or business debts						
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapt	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		. Do you estimate that after an available to distribute to unsec		is excluded and administrative expenses			
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000		☐ 25,001-50,000			
	you estimate that you owe?	■ 1-49		☐ 5001-10,000		☐ 50,001-100,000			
	owe:	100-19	-	1 0,001-25,000		☐ More than100,000			
		□ 200-99	99						
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10	million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50		□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$10 □ \$100,000,001 - \$5		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		— \$500,0		— \$100,000,001		— Word than too billion			
20.	How much do you estimate your liabilities	□ \$0 - \$5	•	<u> </u>		□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 □ \$50.000.001 - \$10		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100,000,001 - \$100,000,001		☐ More than \$50 billion			
		ш ф500,0	701 - \$1 IIIIIIOII						
Par									
For	you	I have exa	amined this petition, and I d	eclare under penalty of perjury	y that the information	on provided is true and correct.			
						der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.			
				d not pay or agree to pay some the notice required by 11 U.S.		attorney to help me fill out this			
		I request	relief in accordance with the	e chapter of title 11, United Sta	ates Code, specifie	d in this petition.			
		operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,							
			ie L. Stintsman L. Stintsman	Sign	nature of Debtor 2				
			of Debtor 1	Sign	add of Doblor 2				
		Executed	on July 10, 2025	Exec	cuted on				
			MM / DD / YYYY			D/YYYY			

Debtor 1 Bonnie L. Stintsm	nan	Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have ex	nformed the debtor(s) about eligibility to proceed explained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.	ertify that I have no know	ledge after an inquiry that the information in the
	/s/ Andrew T. Archer, Esq. Signature of Attorney for Debtor	Date	July 10, 2025 MM / DD / YYYY
	Andrew T. Archer, Esq. Printed name		
	Brenner, Spiller & Archer		
	125 Route 73 North West Berlin, NJ 08091		
	Number, Street, City, State & ZIP Code		
	Contact phone 856-963-5000	Email address	aarcher@spillerarcherlaw.com

005272008 NJ
Bar number & State

Fill	in this informa	tion to identify your	case:			
Deb	otor 1	Bonnie L. Stintsn		Lock Name		
Deh	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bank	ruptcy Court for the:	DISTRICT OF NEW JE	ERSEY CAMDEN VICINAGE		
Cas (if kno	e number				_	k if this is an
					amer	nded filing
~ "		4000				
		<u>m 106Sum</u>	and Liabilitian a	nd Contain Statistical Information		
Be a	s complete and mation. Fill ou original forms	d accurate as possib	le. If two married peoples first; then complete t	nd Certain Statistical Information e are filing together, both are equally responsible for the information on this form. If you are filing amend to the box at the top of this page.	or supplyi	
ran	Sullillar	ize Tour Assets			Your a	assets of what you own
,	Cabadula A/D	Dunamante (Official F	40CA/D)		value	or what you own
1.		B: Property (Official Fo 55, Total real estate, for			\$	349,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	17,741.29
	1c. Copy line 6	63, Total of all property	y on Schedule A/B		\$	366,741.29
Part	2: Summar	ize Your Liabilities				
					Your I	iabilities
						nt you owe
2.			aims Secured by Propert nn A, Amount of claim, a	y (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	289,289.24
3.			Unsecured Claims (Offici 1 (priority unsecured clain	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	32,988.13
				Your total liabilities	\$	322,277.37
Part	3: Summar	ize Your Income and	Expenses			
4.	Schedule I: Yo	our Income (Official Fo	rm 106l)			
••				le I	\$	5,676.54
5.		our Expenses (Official on the contract of the	,		\$	4,917.00
Part	4: Answer	These Questions for	Administrative and Sta	tistical Records		
6.			er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit this form to the court with yo	ur other so	hedules.
7.	■ Yes What kind of	debt do you have?				

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,357.05

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debto	or 1 🖪	onnie L. Stin	teman					
DODIC		rst Name		Name	Last Name		-	
Debto Spous		rst Name	Middle	Name	Last Name			
Jnite	d States Bankrup	otcy Court for the	e: DISTRICT	OF NE\	W JERSEY CAMDEN VICINAGE			
Case	number							☐ Check if this is an amended filing
Scl n each hink it	fits best. Be as	VB: Pro	cribe items. List a	le. If two	t only once. If an asset fits in more than married people are filing together, both this form. On the top of any additional pa	are equally i	responsible for su	pplying correct
Part 1		,	,		I Estate You Own or Have an Interest In			
	you own or have a		able interest in a	ny resid	dence, building, land, or similar property	?		
□ N ■ N	No. Go to Part 2.	oroperty?	able interest in a		dence, building, land, or similar property t is the property? Check all that apply	?		
□ N ■)	No. Go to Part 2.	oroperty?			t is the property? Check all that apply Single-family home Duplex or multi-unit building	Do not the am	ount of any secure	aims or exemptions. Put d claims on Schedule D: ns Secured by Property.
I.1	No. Go to Part 2. Yes. Where is the part 2. 32 Melrose Dr	ive able, or other descrip		What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not the am Credito	nount of any secure fors Who Have Clair nt value of the	d claims on Schedule D: ns Secured by Property. Current value of the
	No. Go to Part 2. Yes. Where is the part 2. 32 Melrose Dr Street address, if avail	ive able, or other descrip	tion	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not the am Credito	ount of any secure ors Who Have Clair	d claims on Schedule D: ns Secured by Property.
.1	No. Go to Part 2. Yes. Where is the part of the part	ive able, or other descrip	tion 08021-0000	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not the am Credito Currer entire Descri (such a	nt value of the property? \$349,000.00 tibe the nature of yas fee simple, ten.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$349,000.00 our ownership interest
.1	No. Go to Part 2. Yes. Where is the part of the part	ive able, or other descrip	tion 08021-0000	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not the am Credito Currer entire Descri (such a	nt value of the property? \$349,000.00	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$349,000.00 our ownership interest
.1	No. Go to Part 2. Yes. Where is the part of the part	ive able, or other descrip	tion 08021-0000	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on	Do not the am Credito Currer entire Descri (such a	nt value of the property? \$349,000.00 tibe the nature of yas fee simple, ten.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$349,000.00 our ownership interest
.1	No. Go to Part 2. Yes. Where is the part of the part o	ive able, or other descrip	tion 08021-0000	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not the am Credito Currer entire Descri (such a life e	nt value of the property? \$349,000.00 sibe the nature of y as fee simple, tenestate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$349,000.00 our ownership interest ancy by the entireties, of
1.1	No. Go to Part 2. Yes. Where is the part 2. 32 Melrose Dr Street address, if avail	ive able, or other descrip	tion 08021-0000	What	t is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not the am Credito Currer entire Descri (such a life e	nt value of the property? \$349,000.00 libe the nature of y as fee simple, tenestate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$349,000.00 our ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Deb	tor 1 Bonnie L. S	stintsman		Case number (if known)	
3. C a	ars, vans, trucks, trad	ctors, sport utility ve	hicles, motorcycles		
п	No				
_	Yes				
_	163				
3.1	Make: Subaru		Who has an interest in the property? Check one		claims or exemptions. Put
	Model: Forester	•	■ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year: 2017		Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	117000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	1	\square At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$8,011.00	\$8,011.00
Ex			nd other recreational vehicles, other vehicles, attercraft, fishing vessels, snowmobiles, motorcyc		
	Yes				
			rn for all of your entries from Part 2, including		\$8,011.00
.p	ages you have attach	ieu ioi Fait 2. Wille	triat number nere		
Part	3: Describe Your Pers	onal and Household It	ems		
Do y	you own or have any	legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and Examples: Major applia I No I Yes. Describe		, china, kitchenware		
		Personal furniti	ure		\$3,000.00
E		and radios; audio, vid Il phones, cameras, n	eo, stereo, and digital equipment; computers, pri nedia players, games	inters, scanners; music collec	tions; electronic devices
		Personal electron	onics		\$1,200.00
E		d figurines; paintings, iions, memorabilia, co	prints, or other artwork; books, pictures, or other illectibles	r art objects; stamp, coin, or b	aseball card collections;
E	quipment for sports a examples: Sports, phot musical inst No 1 Yes. Describe	ographic, exercise, ar	nd other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes and l	xayaks; carpentry tools;
10. F	-irearms	es, shotguns, ammuni	tion, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1	Bonnie L. Sti	ntsman	Ca	ase number (if known)	
ПYes	. Describe			_	
11. Clothe Exam		thes, furs, leather coats, des	gner wear, shoes, accessories		
□ No					
Yes.	. Describe				
		Clothing			\$300.00
12. Jewel ı					
Exam _i □ No	nples: Everyday jew	velry, costume jewelry, enga	gement rings, wedding rings, heirloom jewe	elry, watches, gems, gol	d, silver
	. Describe				
		Jewelry			\$500.00
	arm animals oples: Dogs, cats, b	sirde horece			
□ No	ipies. Dogs, cais, i	ilus, lioises			
Yes.	. Describe				
		2 cats			\$2.00
15. Add		of all of your entries from P	art 3, including any entries for pages yo	ou have attached	\$5,002.00
101 1	art 5. Write that i	idiliber liere			
Part 4: De	escribe Your Financ	ial Assets			
Do you ov	wn or have any le	gal or equitable interest in	any of the following?		Current value of the
					portion you own? Do not deduct secured claims or exemptions.
16. Cash Exam ■ No	nples: Money you h	ave in your wallet, in your ho	me, in a safe deposit box, and on hand wh	nen you file your petition	1
Exam			unts; certificates of deposit; shares in crec with the same institution, list each.	dit unions, brokerage ho	uses, and other similar
□ No			Institution name:		
■ Yes.			mondion name.		
		17.1. Checking	Bank of America		\$4,728.29
Exam		or publicly traded stocks investment accounts with bro	kerage firms, money market accounts		
■ No		Institution or issuer	name.		
⊔ Yes.		montunori or issuer	idilio.		
	oublicly traded sto venture	ock and interests in incorpo	orated and unincorporated businesses,	including an interest i	n an LLC, partnership, and
	Give specific info	ormation about them			
Official For			Schedule A/B: Property		page 3

De	ebtor 1 Bonnie L.	Stintsman	Case number (if known)	
		Name of entity:	% of ownership:	
	Negotiable instrume Non-negotiable instr ■ No		e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
	Retirement or pensi Examples: Interests ■ No □ Yes. List each according	in IRA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing plan	os
		Type of account:	Institution name:	
22.		used deposits you have made so that y	vou may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others
	Annuities (A contract ■ No □ Yes	et for a periodic payment of money to y Issuer name and description.	ou, either for life or for a number of years)	
	Interests in an educa	1), 529A(b), and 529(b)(1).	ed ABLE program, or under a qualified state tuition progra	m.
	☐ Yes	Institution name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
	No	future interests in property (other to information about them	han anything listed in line 1), and rights or powers exercis	able for your benefit
	Examples: Internet of No	, trademarks, trade secrets, and oth domain names, websites, proceeds from information about them		
27.		s, and other general intangibles permits, exclusive licenses, cooperative	e association holdings, liquor licenses, professional licenses	
	☐ Yes. Give specific	information about them		
M	oney or property owe	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to ■ No □ Yes. Give specific		ther you already filed the returns and the tax years	
	Family support Examples: Past due No Yes. Give specific		t, child support, maintenance, divorce settlement, property sett	tlement
30.			lisability benefits, sick pay, vacation pay, workers' compensat lse	ion, Social Security

Official Form 106A/B Schedule A/B: Property page 4

■ No

D	ebtor 1	Bonnie L. Stintsman	Case number (if known)	
	☐ Yes.	Give specific information		
31		ets in insurance policies bles: Health, disability, or life insurance; health savings account (HSA	A); credit, homeowner's, or renter's insural	nce
		Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
		Term life insurance	_	\$0.00
32	If you a someo	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	ance policy, or are currently entitled to rec	eive property because
33	Examp ■ No	against third parties, whether or not you have filed a lawsuit or oles: Accidents, employment disputes, insurance claims, or rights to some describe each claim		
34	■ No	contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to	set off claims
35	■ No	nancial assets you did not already list Give specific information		
36		the dollar value of all of your entries from Part 4, including any eart 4. Write that number here		\$4,728.29
Pa	art 5: De	scribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
37.	Do you o	own or have any legal or equitable interest in any business-related prope	erty?	
	No. Go	o to Part 6.		
	☐ Yes. G	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or ou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46		own or have any legal or equitable interest in any farm- or com	mercial fishing-related property?	
	☐ Yes	. Go to line 47.		
Pa	art 7:	Describe All Property You Own or Have an Interest in That You Did No	t List Above	
53		have other property of any kind you did not already list? oles: Season tickets, country club membership		
	☐ Yes.	Give specific information		
54	4. Add t	the dollar value of all of your entries from Part 7. Write that numl	ber here	\$0.00

Debtor 1 Bonnie L. Stintsman			Case number (if known)	
Part 8: List the Totals of Each Part of this Form				
55. Part 1: Total real estate, line 2				\$349,000.00
56. Part 2: Total vehicles, line 5		\$8,011.00		
57. Part 3: Total personal and household items, line 15		\$5,002.00		
58. Part 4: Total financial assets, line 36		\$4,728.29		
59. Part 5: Total business-related property, line 45		\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61. Part 7: Total other property not listed, line 54	+	\$0.00		
62. Total personal property. Add lines 56 through 61		\$17,741.29	Copy personal property total	\$17,741.29
63. Total of all property on Schedule A/B. Add line 55 + line 62	2			\$366,741.29

Debtor 1	Bonnie L. Stintsn	nan		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY CAMDEN VICINAGE	
Case number (if known)				☐ Check if this is amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	ou claiming?	Check one only	, even if y	your spouse i	s filing with	yοι

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

Part 1: Identify the Property You Claim as Exempt

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	1.
32 Melrose Drive Pine Hill, NJ 08021 Camden County	\$349,000.00	\$28,810.7	11 U.S.C. § 522(d)(1)
349000 - 34900 = 314100 - 285289.24 = 28810.76 (no excess equity) Line from <i>Schedule A/B</i> : 1.1		☐ 100% of fair market value, up any applicable statutory limit	to
2017 Subaru Forester 117000 miles	\$8,011.00	\$4,011.0	11 U.S.C. § 522(d)(2)
Line Holli Schedule A/D. 3.1		100% of fair market value, up any applicable statutory limit	to
Personal furniture Line from Schedule A/B: 6.1	\$3,000.00	\$3,000.0	11 U.S.C. § 522(d)(3)
Ellie Holli Golledale PAB. G.1		☐ 100% of fair market value, up any applicable statutory limit	to
Personal electronics Line from Schedule A/B: 7.1	\$1,200.00	\$1,200.0	11 U.S.C. § 522(d)(3)
Line Holli Golleddie Arb. 1.1		☐ 100% of fair market value, up any applicable statutory limit	to
Clothing Line from Schedule A/B: 11.1	\$300.00	\$300.0	11 U.S.C. § 522(d)(3)
Line from Schedule A/D. 11.1		100% of fair market value, up any applicable statutory limit	to

Deptor	Bonnie L. Stintsman			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim Specific portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ewelry ne from <i>Schedule A/B</i> : 12.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
<u> </u>	io II di ii de ii di ii			100% of fair market value, up to any applicable statutory limit	
_	cats ne from Schedule A/B: 13.1	\$2.00		\$2.00	11 U.S.C. § 522(d)(3)
LII	io II di II de l'educe Al D. 1011			100% of fair market value, up to any applicable statutory limit	
	necking: Bank of America	\$4,728.29		\$4,439.24	11 U.S.C. § 522(d)(5)
LII	le IIIII Schedule AVD. 17.1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/28 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises fi	,	,

Fill in this informa	ation to identify you	ır case:			
Debtor 1	Bonnie L. Stints				
	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	kruptcy Court for the	DISTRICT OF NEW JERSEY CAMDEN VIC	INAGE		
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
O(() : F	400D				
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Secured	d by Property	y	12/15
Be as complete and a	accurate as possible.	If two married people are filing together, both are eq	ually responsible for su	pplying correct informa	tion. If more space
is needed, copy the A		out, number the entries, and attach it to this form. O			
number (if known).		. •			
	ave claims secured by	,, , ,			
	his box and submit t	his form to the court with your other schedules. Y	ou have nothing else to	o report on this form.	
Yes. Fill in a	all of the information	below.			
Part 1: List All	Secured Claims				
2. List all secured cl	aims. If a creditor has	more than one secured claim, list the creditor separately	, Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, list	tile ciaiilis ili aipilabeti	cal order according to the creditor 3 hame.	value of collateral.	claim	If any
2.1 Bank of An	nerica	Describe the property that secures the claim:	\$4,000.00	\$8,011.00	\$0.00
Creditor's Name		2017 Subaru Forester 117000 miles			
Attn. Dank					
Attn: Bankı	-14 Pob 26012	As of the date you file, the claim is: Check all that			
	o, NC 27410	apply. ☐ Contingent			
Number, Street, C	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or see	cured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this clai community debt		Other (including a right to offset) Purchase I	Money Security		

Date debt was incurred 2020

Last 4 digits of account number

4705

Debtor 1 Bonnie L. Stintsman		Case number (if known)			
First Name Middle N	ame Last Name				
2.2 Cavalry Spv I, LLC	Describe the property that secures the claim:	\$745.24	\$349,000.00	\$0.00	
Creditor's Name	32 Melrose Drive Pine Hill, NJ 08021 Camden County 349000 - 34900 = 314100 - 285289.24 = 28810.76 (no excess equity)				
PO Box 4252 Greenwich, CT 06831	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	□ Unliquidated				
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred 2023	Last 4 digits of account number 7525				
2.3 Discover Financial	Describe the property that secures the claim:	\$12,973.00	\$349,000.00	\$0.00	
Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	32 Melrose Drive Pine Hill, NJ 08021 Camden County 349000 - 34900 = 314100 - 285289.24 = 28810.76 (no excess equity) As of the date you file, the claim is: Check all that apply. □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or s car loan)	ecured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				

1550

Date debt was incurred 2023

Last 4 digits of account number

Debtor 1 Bonnie L. Stintsman	Case number (if known)				
First Name Middle N	ame Last Name				
2.4 NJHFMA	Describe the property that secures the claim:	\$32,000.00	\$349,000.00	\$0.00	
Creditor's Name	32 Melrose Drive Pine Hill, NJ 08021				
	Camden County				
	349000 - 34900 = 314100 - 285289.24				
	= 28810.76 (no excess equity)				
637 S Clinton Ave	As of the date you file, the claim is: Check all that apply.				
Trenton, NJ 08611	☐ Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Second Mo	ortgage			
Date debt was incurred	Last 4 digits of account number				
U.S. Department of					
Housing and Urban Dev	Describe the property that secures the claim:	\$18,000.00	\$349,000.00	\$0.00	
Creditor's Name	32 Melrose Drive Pine Hill, NJ 08021				
	Camden County				
	349000 - 34900 = 314100 - 285289.24				
	= 28810.76 (no excess equity)				
451 7th Street, S.W.	As of the date you file, the claim is: Check all that apply.				
Washington, DC 20410	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Third Mort	gage			

Date debt was incurred

Last 4 digits of account number

Debtor	1 Bonnie L. Stintsman		C	ase number (if known)		
	First Name Middle N	lame Last Name	_			
126 17	Jnited Wholesale ⁄lortgage	Describe the property that secures t	he claim:	\$221,571.00	\$349,000.00	\$0.00
	reditor's Name					
Č	realer s realie	32 Melrose Drive Pine Hill, N Camden County	13 06021			
		349000 - 34900 = 314100 - 28	E200 24			
F	Attn: Bankruptcy					
5	85 South Boulevard	= 28810.76 (no excess equity As of the date you file, the claim is:				
Е	ast	apply.	Check all that			
F	Pontiac, MI 48341	☐ Contingent				
N	lumber, Street, City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who o	wes the debt? Check one.	Nature of lien. Check all that apply.				
Deb	tor 1 only	☐ An agreement you made (such as r	mortgage or secu	ıred		
	tor 2 only	car loan)	gaga ar aasa			
	•	Charleston line (accepts and too line accepts)	-1			
	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
_	east one of the debtors and another	☐ Judgment lien from a lawsuit	M1			
	ck if this claim relates to a mmunity debt	Other (including a right to offset)	Mortgage			
Date de	ebt was incurred 2021	Last 4 digits of account numb	per 4389			
Add t	he dollar value of your entries in C	Column A on this page. Write that num	ber here:	\$289,289.	24	
		the dollar value totals from all pages.		\$289,289.		
Write	that number here:			\$209,209.	24	
Part 2	List Others to Be Notified for	or a Debt That You Already Listed				
		•		bleady listed in Dort 4. Co	v avamula if a callection	
		be notified about your bankruptcy for a nowe to someone else, list the creditor i				
		it you listed in Part 1, list the additiona				
debts i	n Part 1, do not fill out or submit tl	his page.			·	
[]						
	Name, Number, Street, City, State	& Zip Code	On which	n line in Part 1 did you ente	r the creditor? 2.2	
	Apothaker Scian PC					
	PO Box 5496		Last 4 di	gits of account number		
	Mount Laurel, NJ 08054					
[]	Name, Number, Street, City, State &	& Zip Code	On which	n line in Part 1 did you ente	r the creditor? 22	
	Cavalry Portfolio Services		On which	Time in Fait Tuld you ente	i the creditor:	
	Attn: Bankruptcy		Last 4 di	gits of account number		
	1 American Lane, Ste 220					
	Greenwich, CT 06831					
[]	Name, Number, Street, City, State	& Zin Code	0	a line in Dout 4 allah	with a graditary 2 2 2	
	Pressler, Felt & Warshaw,		On which	n line in Part 1 did you ente	r the creditor?	
	7 Entin Rd.	,	l act ∆ di	gits of account number		
	Parsippany, NJ 07054		Last 4 UI	g or account number		

Fill in this	information to identify your c	ase:				
Debtor 1	Bonnie L. Stintsm					
Dahtan 0	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	DISTRICT OF NEW.	JERSEY CAMDEN VICINAGE	=		
Ormod Otal	oo Barinaptoy Court for tho.		JEROET OF WINDER VIOLATION			
Case numb	er				□ Chaol	, if this is an
(II KIIOWII)						c if this is an ded filing
					umen	aca iiii ig
Official F	Form 106E/F					
Schedu	le E/F: Creditors W	ho Have Unse	cured Claims			12/15
any executor Schedule G: Schedule D: left. Attach th name and ca	ete and accurate as possible. Use y contracts or unexpired leases t Executory Contracts and Unexpiral Creditors Who Have Claims Seculate the Continuation Page to this page se number (if known).	that could result in a cla red Leases (Official Forr ired by Property. If more b. If you have no informa	im. Also list executory contract n 106G). Do not include any cre space is needed, copy the Part	ts on Schedule A/B: P editors with partially s t you need, fill it out, i	Property (Official For ecured claims that number the entries	rm 106A/B) and on are listed in in the boxes on the
	creditors have priority unsecured					
_ `	Go to Part 2.	<u>.</u> ,				
Yes.						
identify v possible,	of your priority unsecured claims what type of claim it is. If a claim has list the claims in alphabetical order more than one creditor holds a par	s both priority and nonprior according to the creditor	rity amounts, list that claim here a 's name. If you have more than tw	and show both priority a	nd nonpriority amou	nts. As much as
(For an e	explanation of each type of claim, se	ee the instructions for this	form in the instruction booklet.)	Total claim	Priority	Nonpriority
				Total claim	amount	amount
	ernal Revenue Service	Last 4 digits	of account number	\$0.00	\$0.00	\$0.00
	ority Creditor's Name D Box 7346	When was t	he debt incurred?			
Ph	iladelphia, PA 19101-7346	<u> </u>			-	
	nber Street City State Zip Code	_	te you file, the claim is: Check a	all that apply		
		☐ Continge				
_	otor 1 only	☐ Unliquida	ited			
∐ Deb	otor 2 only	☐ Disputed				
☐ Deb	otor 1 and Debtor 2 only		ORITY unsecured claim:			
☐ At le	east one of the debtors and another		support obligations			
☐ Che	eck if this claim is for a commun	_	d certain other debts you owe the	•		
	claim subject to offset?	☐ Claims fo	or death or personal injury while yo	ou were intoxicated		
■ No		☐ Other. Sp	For notice purpose			_
☐ Yes	; 		For notice purpose	es only		
2.2 Sta	ate Of New Jersey	Last 4 digits	s of account number	\$0.00	\$0.00	\$0.00
	ority Creditor's Name	\A/I ₂ = 4			-	
	9 Box 283 enton, NJ 08602	wnen was t	he debt incurred?		-	
	nber Street City State Zip Code	As of the da	te you file, the claim is: Check a	all that apply		
Who in	curred the debt? Check one.	☐ Continge	nt			
Deb	otor 1 only	☐ Unliquida	ited			
☐ Deb	otor 2 only	☐ Disputed				
☐ Deb	otor 1 and Debtor 2 only	Type of PRI	ORITY unsecured claim:			
☐ At le	east one of the debtors and another	. Domestic	support obligations			
☐ Che	eck if this claim is for a commun	ity debt Taxes an	d certain other debts you owe the	government		
	claim subject to offset?	-	or death or personal injury while yo	=		
■ No		☐ Other. Sp				_
☐ Yes	:	·	For notice purpose	es only		=

Debto	or 1	Bonnie L. Stintsman		Case number (if known)	
		Les de la compositione	101		
Part 2		List All of Your NONPRIORITY Unsecuty creditors have nonpriority unsecured claim			
_	_		-		
	J No	. You have nothing to report in this part. Submit	this form to the court with your other sche	edules.	
	Ye	s.			
ur th	nsec	Il of your nonpriority unsecured claims in the ured claim, list the creditor separately for each claim creditor holds a particular claim, list the other.	laim. For each claim listed, identify what	type of claim it is. Do not list claims already inc	cluded in Part 1. If more
	_			0050	
4.1		Amex Ionpriority Creditor's Name	Last 4 digits of account number	0256	\$2,151.00
	F	Correspondence/Bankruptcy O Box 981540 El Paso, TX 79998	When was the debt incurred?	2022	-
	Ν	lumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
		Debtor 1 only	☐ Contingent		
		Debtor 2 only	☐ Unliquidated		
		Debtor 1 and Debtor 2 only	☐ Disputed		
		At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Check if this claim is for a community	☐ Student loans		
		ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
		No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		Yes	■ Other. Specify Credit Card	l Purchases	_
4.2	P	Amex	Last 4 digits of account number	1143	\$846.00
	F	lonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981535 El Paso, TX 79998	When was the debt incurred?	2023	_
	Ν	lumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
		Debtor 1 only	☐ Contingent		
		Debtor 2 only	☐ Unliquidated		
		Debtor 1 and Debtor 2 only	☐ Disputed		
		At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Check if this claim is for a community	☐ Student loans		
		ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	ı	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		Yes	Other. Specify Credit Card	l Purchases	_

Debtor	Bonnie L. Stintsman		Case number (if known)			
	AT&T Mobility Nonpriority Creditor's Name	Last 4 digits of account number	7797	\$1,015.00		
	PO Box 537104 Atlanta, GA 30353	When was the debt incurred?	2023			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?		ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Collection				
4.4	Avant	Last 4 digits of account number	2847	\$2,328.00		
	Nonpriority Creditor's Name	_				
	Attn: Bankruptcy	When was the debt incurred?	2023			
	Po Box 9183380 Chicago, IL 60691					
	Number Street City State Zip Code	As of the date you file, the claim	s of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Collection a DC0160642 ■ Other. Specify *5458				
4.5	Bank of America	Last 4 digits of account number	9293	\$466.00		
	Nonpriority Creditor's Name			Ψ+00.00		
	Attn: Bankruptcy	When was the debt incurred?	2023			
	4909 Savarese Circle					
-	Tampa, FL 33634 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	, a c a a a a a a a a a a a a a a a a a	or chook all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	_	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	3			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Other. Specify Credit Card	l Purchases			

Debto	Bonnie L. Stintsman		Case number (if known)	
4.6	Capital One	Last 4 digits of account number	2919	\$2,105.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Self Loke City LIT 84130	When was the debt incurred?	2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	I Purchases	
4.7	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	1958	\$11,015.00
	Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	2023	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify	l Purchases -23	
4.8	Comenity Bank	Last 4 digits of account number	0926	\$2,795.00
	Nonpriority Creditor's Name PO Box 182125	When was the debt incurred?	2023	
	Columbus, OH 43218 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	,	or chook an inat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	l Purchases	

Debtor	Bonnie L. Stintsman	Case number (if known)	
4.9	Cooper Health System	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name PO Box 6018 Bellmawr, NJ 08099	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.1	Virtua Health	Last 4 digits of account number 2368	\$1,400.00
	Nonpriority Creditor's Name 2000 Crawford Place Suiite 100	When was the debt incurred?	·
	Mount Laurel, NJ 08054 Number Street City State Zip Code	As of the date yearfile, the plains in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.1	Weinberger Divorce & Family Law		\$5,867.13
1	Group Nonpriority Creditor's Name	Last 4 digits of account number	Ψ3,007.13
	1000 Atrium Way, Suite 402 Mount Laurel, NJ 08054	When was the debt incurred?	
•	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collection account	
	160	Oner. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Bonnie L. Stintsman		Case number (if known)
Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Bullato, N1 14200	Last 4 digits of account number	6707
Name and Address Firstsource Advantage LLC 205 Bryant Woods South	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Amherst, NY 14280	Last 4 digits of account number	9293
Name and Address Jefferson Capital Systems, LLC 1355 S. Colorado Blvd., Ste 400, Bldg C Denver, CO 80222	On which entry in Part 1 or Part 2 did Line 4.4 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
5511761, 55 55222	Last 4 digits of account number	
Name and Address Midland Credit Management Attn: Bankruptcy PO Box 939069 San Diego, CA 92193	On which entry in Part 1 or Part 2 did Line 4.8 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address Mullooly Jeffrey Rooney & Flynn LLP 6851 Jericho Tpke, Ste 220 Syosset, NY 11791	On which entry in Part 1 or Part 2 did Line 4.7 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Cycset, Wi 11731	Last 4 digits of account number	
Name and Address Radius Global Solution Attn: Bankruptcy 7931 Glenroy Rd, Ste 250 Edina, MN 55439	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Eulia, MN 33439	Last 4 digits of account number	
Name and Address Sage Capital Recovery 401 Minnetonka Rd Hi-Nella, NJ 08083	On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>):	d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Til Holia, No ooooo	Last 4 digits of account number	2368
Part 4: Add the Amounts for Each Type of		cal reporting purposes only. 28 U.S.C. §159. Add the amounts for each

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	32,988.13
	6b. 6c. 6d. 6e. 6f.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6b. 6c. 6d. 6d. 6d. 6d. 6d. 6d. 6d. 6e.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6e. \$ 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6b. \$ 6c. \$ 6d. \$ 6d. \$ 6d. \$ 6e. \$ 6g. \$ 6g. \$ 6h. \$

Debtor 1	Bonnie L. Stintsman	Case number (if known)	
	here		

6j. **Total Nonpriority.** Add lines 6f through 6i. 6j. \$______**32,988.13**

ill in this information to identify your case:							
Bonnie L. Stintsm	nan						
First Name	Middle Name	Last Name					
First Name	Middle Name	Last Name					
nkruptcy Court for the:	DISTRICT OF NEW JEI	RSEY CAMDEN VICINAGE					
			☐ Check if this is an amended filing				
	Bonnie L. Stintsm First Name	Bonnie L. Stintsman First Name Middle Name First Name Middle Name	Bonnie L. Stintsman First Name Middle Name Last Name First Name Middle Name Last Name				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.2				·	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	,				
2.0	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,		0.0.0	0000	

Debtor 1	Bonnie L. Stints	sman				
	First Name	Middle Name	Last Name			
Debtor 2	 					
Spouse if, fil	ling) First Name	Middle Name	Last Name			
Inited Sta	ates Bankruptcy Court for the	DISTRICT OF NEW JEE	RSEY CAMDEN VICIN	AGE		
ase num	nber				☐ Check if t	hic ic an
					amended	
)fficic	J Form 106U					
	al Form 106H dule H: Your Co	dobtors				40/45
CHEC	dule H. Toul Co	depiors				12/15
_	you have any codebtors? (a. , sa are ming a joint odde, t	as not not ourior opoust	. as a obabiliti		
ll it out, a	e filing together, both are ed and number the entries in th e and case number (if know	he boxes on the left. Attach	the Additional Page			
■ No)					
☐ Ye	es					
Arizo	thin the last 8 years, have y na, California, Idaho, Louisiar					s include
Arizo		na, Nevada, New Mexico, Pu	erto Rico, Texas, Wash			s include
Arizon No Ye 3. In Co in line Form	na, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Officicolumn 2.	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filin sure you have listed the OGG). Use Schedule D,	g with you. List the he creditor on Sched Schedule E/F, or Sc	person show dule D (Offici hedule G to
Arizon No Ye 3. In Co in line Form	na, California, Idaho, Louisiar c. Go to line 3. es. Did your spouse, former spouse clumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Offic	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filin sure you have listed the OGG). Use Schedule D,	g with you. List the he creditor on Sched Schedule E/F, or Sc editor to whom you	person show dule D (Offici hedule G to
Arizon No Ye No In Co in lini Form out C	na, California, Idaho, Louisiar b. Go to line 3. c. Did your spouse, former spousent 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Office Column 2.	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filin sure you have listed the OGG). Use Schedule D, Column 2: The cre Check all schedule	g with you. List the he creditor on Sched Schedule E/F, or Sc editor to whom you a es that apply:	person show dule D (Offici hedule G to f
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Arizon No Ye 3. In Co in lin Form out C	na, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Officiolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filin sure you have listed the DGG). Use Schedule D, Column 2: The cree Check all schedule Schedule D, lin Schedule E/F, I	g with you. List the he creditor on Sched Schedule E/F, or Scheditor to whom you es that apply:	person show dule D (Offici hedule G to
Arizon No Ye No In Co in lini Form out C	na, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Officiolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filin sure you have listed the DGG). Use Schedule D, Column 2: The cree Check all schedule Schedule D, lin Schedule E/F, I	g with you. List the he creditor on Sched Schedule E/F, or Scheditor to whom you es that apply:	person show dule D (Offici hedule G to
Arizon No Ye 3. In Co in line Form out C	na, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Officiolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	erto Rico, Texas, Wash e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to 106G). Use Schedule D, Column 2: The cre Check all schedule Schedule D, lin Schedule E/F, I	g with you. List the he creditor on Sched Schedule E/F, or Scheditor to whom you es that apply: e line	person show dule D (Offici hedule G to
Arizon No Ye 3. In Co in lin Form out C	na, California, Idaho, Louisiar o. Go to line 3. es. Did your spouse, former spolumn 1, list all of your code e 2 again as a codebtor only 106D), Schedule E/F (Officiolumn 2. Column 1: Your codebtor Name, Number, Street, City, State and	na, Nevada, New Mexico, Pu pouse, or legal equivalent live ebtors. Do not include your y if that person is a guaran ial Form 106E/F), or Sched	erto Rico, Texas, Wash e with you at the time? spouse as a codebto tor or cosigner. Make ule G (Official Form 1)	r if your spouse is filin sure you have listed to D6G). Use Schedule D, Column 2: The cre Check all schedule Schedule D, lin Schedule E/F, I	g with you. List the he creditor on Schedule E/F, or Schedule E/F, or Scheditor to whom you es that apply: elineline	person show dule D (Offici hedule G to
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Fill	in this information to identify your c	ase.				1				
	otor 1 Bonnie L. S									
_	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF NEW J	IERSEY CAMDEN VIO	CINAGE						
	se number nown)		-			□ Ar		ed filing ent showir	ng postpetitior	
0	fficial Form 106I						M / DD/ Y		following date	:
	chedule I: Your Inc	ome				IVII	ז /טט / ואו	111		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. Describe Employment	are married and not fili	ng jointly, and your s ith you, do not includ	spouse de infor	is liv matic	ing with yon about	you, inclu your spo	ude infori ouse. If m	mation about ore space is	t your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-f	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Emplo	•		
	information about additional employers.		☐ Not employed				☐ Not er	mployed		
	Include part-time, seasonal, or	Occupation	Customer Succe	ess Sp	ecia	list				
	self-employed work.	Employer's name	LumiThera							
	Occupation may include student or homemaker, if it applies.	Employer's address	19578 10th Ave Poulsbo, WA 98		200)				
		How long employed t	here? 1 month	1			_			
Pai	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any	line, write	\$0 in the	space. In	clude your no	n-filing
•	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all	emplo	oyers for t	hat perso	n on the I	ines below. If	you need
						For Deb	tor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7,0	024.96	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	_
4	Calculate gross Income Add li	na 2 ± lina 3		4	\$	7 02	4 96	\$	N/A	1

Debtor 1	Bonnie L. Stintsman	Case number (if known)	
		-	

Copy line 4 here				For	For Debtor 1		For Debtor		
5. List all payroll deductions: 5. Tax, Medicare, and Social Security deductions 5. Sa. S 1,174,04 \$ NI/A 5. Mandatory contributions for retirement plans 5. Ni/A 5. Voluntary contributions for retirement plans 5. Required repayments of retirement fund loans 5. Required repayments of retirement fund loans 5. Required repayments of retirement fund loans 5. Ni/A 5. Domestic support obligations 5. S. S. 54,38 Ni/A 5. Domestic support obligations 5. S. S. 54,38 Ni/A 5. Union dues 5. S. S. 54,38 Ni/A 5. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. S. 5,296.54 Ni/A 8. List all other income regularly receives. 8. Ni Internet and dividends 8. Ni Internet for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8. B. Internet and dividends 8. E. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8. Social Security 8. Ono S NI/A 8. Unemployment compensation 8. Social Security 8. Ono S NI/A 8. Other government assistance that you regularly receive include alimony, spousal support, or non-filling spouse, or a dependent Number of the Supplemental Nutrition Assistance Program for housing subsidies. 8. Special Security 8. Special Security 8. Ono S NI/A 8. One government assistance that you regularly receive include assistance and the value (if known) of any non-cash assistance that you receive such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8. Special Security 8. Special		Copy line 4 here	4.	\$	7,024.9			•	
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13. Do you expect an increase or decrease within the year after you file this form?	12.	Write that amount on the Summary of Schedules and Statistical Summary of					it	\$	5,676.54
	13.	Do you expect an increase or decrease within the year after you file thi	s form?						

No.	
Yes. Explain:	

Fill in this information to identify your case:			
Debtor 1 Bonnie L. Stintsman	Che	ck if this is:	
Debtor 2 (Spouse, if filing)		An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY CAMDEL VICINAGE	N	MM / DD / YYYY	
Case number			
Official Form 106J Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing information. If more space is needed, attach another sheet to this form number (if known). Answer every question.			
Part 1: Describe Your Household 1. Is this a joint case?			
■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?			
☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for S</i>	Separate Household of Deb	otor 2.	
2. Do you have dependents? ☐ No			
Do not list Debtor 1 and Ves Fill out this information for De	ependent's relationship to ebtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents names.	aughter	13	□ No ■ Yes
D	aughter	16	□ No ■ Yes
_		_ ,	□ No □ Yes □ No
_			☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes			
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplemental applicable date.			
Include expenses paid for with non-cash government assistance if you the value of such assistance and have included it on <i>Schedule I: Your (Official Form 106I.)</i>	know Income	Your expe	enses
 The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot. 	le first mortgage 4.	.	1,920.00
If not included in line 4:			
4a. Real estate taxes	4a. S	\$	0.00
4b. Property, homeowner's, or renter's insurance	4b.	·	0.00
4c. Home maintenance, repair, and upkeep expenses	4c.	·	100.00
4d. Homeowner's association or condominium dues5. Additional mortgage payments for your residence, such as home e	4d. 3 quity loans 5. 3	·	0.00

ebtor 1	Bonnie L. Stintsman	Case num	ber (if known)	
Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.	\$	45.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	175.00
6d.	Other. Specify: Cell phone	6d.	\$	160.00
	d and housekeeping supplies		\$	1,150.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	188.00
	sonal care products and services	10.	\$	94.00
	lical and dental expenses	11.	\$	25.00
	nsportation. Include gas, maintenance, bus or train fare.		<u> </u>	20.00
	not include car payments.	12.	\$	120.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	ritable contributions and religious donations	14.	\$	0.00
Insu	ırance.			
Doi	not include insurance deducted from your pay or included in lines 4 or 20.			
15a	Life insurance	15a.	\$	80.00
15b	Health insurance	15b.	\$	0.00
15c	Vehicle insurance	15c.	\$	135.00
15d	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe		16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	·	375.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	10	¢.	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
	er payments you make to support others who do not live with you.	40	Ф	0.00
Spe	·	19.	ur Incomo	
	er real property expenses not included in lines 4 or 5 of this form or on Sche Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	· -	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20d. 20e.		0.00
			·	
Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
22a	Add lines 4 through 21.		\$	4,917.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c	Add line 22a and 22b. The result is your monthly expenses.		\$	4,917.00
	culate your monthly net income.	225	¢	E 070 E 4
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	5,676.54
230	Copy your monthly expenses from line 22c above.	23b.	-\$	4,917.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	759.54
For 6	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you fication to the terms of your mortgage?			or decrease because of

Fill in th	is information to identify you	r case:			
Debtor 1	Bonnie L. Stints	man			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
	3,		SEY CAMDEN VICINAGE		
United S	tates Bankruptcy Court for the:	DISTRICT OF NEW JER	SET CAMPEN VICINAGE		
Case nu	mber				
(if known)					eck if this is an ended filing
				and	maga ming
Officia	l Form 106Dec				
		امييامانيناميما	Dobtorio Cobo	ماريام	
Deci	aration About	an individual	Deptor S Sche	aules	12/15
If two ma	arried people are filing togethe	er, both are equally respon	sible for supplying correct in	nformation.	
You mus	t file this form whenever you	file bankruptcy schedules	or amended schedules. Maki	ing a false statement, concea	ling property, or
				es up to \$250,000, or imprison	
years, or	both. 18 U.S.C. §§ 152, 1341,	1519, and 3571.			
	Ciam Balann				
	Sign Below				
D:-		anna suba in NOT an attaur		tata	
Dio	you pay or agree to pay som	eone who is NOT an attorn	iey to neip you fill out bankri	uptcy forms?	
_	No				
_	Yes. Name of person			Attach Bankruptcy Petition	Proparor's Notice
Ц	res. Ivallie of person			Declaration, and Signature	
					(
	er penalty of perjury, I declare they are true and correct.	e that I have read the sumn	nary and schedules filed with	n this declaration and	
х	/s/ Bonnie L. Stintsman		X		
-	Bonnie L. Stintsman		Signature of Debto	or 2	
	Signature of Debtor 1				
	Date July 10 2025		Date		

Fil	l in this inforn	nation to identify you	r case:			
De	btor 1	Bonnie L. Stints	man			
		First Name	Middle Name	Last Name		
1	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Ur	ited States Ba	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY CAMDEN VICINAGE		
Ca	se number					
(if k	nown)				_	Check if this is an mended filing
O.	fficial Fo	rm 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/25
					equally responsible for sup	
		n). Answer every que		uns form. On the top of an	y additional pages, write you	ii iiailie aliu case
Pa	rt 1: Give D	Details About Your Ma	nrital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married					
	■ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you I	ived in the last 3 years. Do no	ot include where you live now	I.	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3.					ity property state or territory	
sta	tes and territor	<i>ies</i> include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
	_	ig a joint case and you	nave moome that you receiv	o togothor, not it offiny office di	ider Bebler 1.	
	□ No ■ Vos Fill	I in the details.				
	- 165. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$23,862.30	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 Bonnie L. Stintsman Cas			e number (if known)			
		Debtor 1	Our livery	Debtor 2	One in the	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
For last cale (January 1 to	endar year: o December 31, 20	■ Wages, commissions, bonuses, tips	\$30,142.00	☐ Wages, commissions, bonuses, tips		
		☐ Operating a business		☐ Operating a business		
		☐ Wages, commissions, bonuses, tips	\$-895.00	☐ Wages, commissions, bonuses, tips		
		Operating a business		☐ Operating a business		
For the cale (January 1 to	ndar year before to o December 31, 20	hat: Wages, commissions, bonuses, tips	\$23,797.00	☐ Wages, commissions, bonuses, tips		
		☐ Operating a business		☐ Operating a business		
		☐ Wages, commissions, bonuses, tips	\$5,812.00	☐ Wages, commissions, bonuses, tips		
		Operating a business		☐ Operating a business		
and othe winnings List each	r public benefit pay . If you are filing a j	of whether that income is taxable. Examents; pensions; rental income; inter oint case and you have income that yours income from each source separate	rest; dividends; money collect you received together, list it o	ted from lawsuits; royalties; an only once under Debtor 1.	d gambling and lottery	
		Debtor 1		Debtor 2		
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)	
Part 3: Li	st Certain Paymen	nts You Made Before You Filed for	Bankruptcy			
6. Are either No.	Neither Debtor	ebtor 2's debts primarily consumer 1 nor Debtor 2 has primarily consurily for a personal, family, or househol	umer debts. Consumer debts	s are defined in 11 U.S.C. § 10	1(8) as "incurred by an	
	During the 90 da	ays before you filed for bankruptcy, di	d you pay any creditor a tota	I of \$8,575* or more?		
		to line 7.				
	paid not i	below each creditor to whom you pai I that creditor. Do not include paymer include payments to an attorney for th ustment on 4/01/28 and every 3 years	nts for domestic support oblig his bankruptcy case.	ations, such as child support a	ınd alimony. Also, do	
■ Yes	Debtor 1 or Deb	otor 2 or both have primarily consusts ays before you filed for bankruptcy, di	ımer debts.	·	•	
	_	, , , , , , , , , , , , , , , , , , , ,	, , , , ,			

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

 \square Yes

Deb	otor 1 Bonnie L. Stintsman		Cas	e number (if known)	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you	ou are a general partner; corporations ny managing agent, including one fo
	Yes. List all payments to an insider.				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on a	ccount of a debt that benefited an
	Yes. List all payments to an insider	Datas of manner	T-1-1	A	Decree for this manner
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No				
	Yes. Fill in the details.				
	Case title Case number	Nature of the case			Status of the case
	Jefferson Capital Systems Llc vs BONNIE STINTSMAN DC01606424	Civil action	SUPERIOR COURT SPECIAL CIVIL PART SUPERIOR COURT SPECIAL CIVIL PART		■ Pending □ On appeal □ Concluded
	Cavalry Spv I Lic vs BONNIE STINTSMAN DC01075924; VJ-9812-24	Civil action			☐ Pending ☐ On appeal ☐ Concluded Judgment
	Discover Bank vs BONNIE STINTSMAN DC00724923; VJ-7199-23	Civil action	SUPERIOR CO SPECIAL CIVIL	-	☐ Pending ☐ On appeal ☐ Concluded
					Judgment
	South Jersey Radiology Associa vs BONNIE STINTSMAN DC01164318; VJ-309-19	Civil action	CAMDEN COUI SPECIAL CIVIL		☐ Pending ☐ On appeal ☐ Concluded Judgment
	JPMorgan Chase vs. Bonnie L. Stintsman DC-012122-23	Civil action	Superior Court Jersey	of New	■ Pending□ On appeal□ Concluded

Del	ebtor 1 Bonnie L. Stintsman	Case number	(if known)	
10.	Within 1 year before you filed for bank Check all that apply and fill in the details	ruptcy, was any of your property repossessed, foreclosed pelow.	l, garnished, attached	I, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the
		Explain what happened		property
11.	Within 90 days before you filed for bar accounts or refuse to make a payment No Yes. Fill in the details.	kruptcy, did any creditor, including a bank or financial in because you owed a debt?	stitution, set off any a	imounts from your
	Creditor Name and Address	Describe the action the creditor took	Date action was	Amount
			taken	
12.	Within 1 year before you filed for bank court-appointed receiver, a custodian, No Yes	ruptcy, was any of your property in the possession of an or another official?	assignee for the bene	fit of creditors, a
Pai	List Certain Gifts and Contribution	ons		
13.	Within 2 years before you filed for ban ■ No □ Yes. Fill in the details for each gift.	kruptcy, did you give any gifts with a total value of more t	han \$600 per person?	?
	Gifts with a total value of more than \$ per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift an Address:	nd		
14.	Within 2 years before you filed for ban ■ No □ Yes. Fill in the details for each gift or	kruptcy, did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that		Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	ode)	contributed	
Pai	rt 6: List Certain Losses			
		ruptcy or since you filed for bankruptcy, did you lose any	thing because of the	t fire other disaster
15.	or gambling?	ruptey of since you med for bankruptey, did you lose any	ining because of the	i, ille, otilei disastei
	□ No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	non the loop countries	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	.555	1031
	Damages to dwelling (pipe leak that caused water damage to the property)	Farmers insurance	7/28/2024	\$28,000.00

Pai	t 7: List Certain Payments or Transfers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.							
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment			
	Brenner, Spiller & Archer 125 Route 73 North West Berlin, NJ 08091 aarcher@spillerarcherlaw.com	Attorney Fees		2024	\$600.00			
	Cricket Debt Counseling 219 SW Stark Street Portland, OR 97204	2024	\$24.99					
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you lis	or to make payments to your creditors		r transfer any prope	rty to anyone who			
	■ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list	ness or financial affairs? as security (such as the granting of a sec						
	■ No							
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you							
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No		lf-settled tru	ust or similar device	of which you are a			
	Yes. Fill in the details.							
	Name of trust	Description and value of the proper	ty transferr	ed	Date Transfer was made			
Pai	t 8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Stora	ge Units					
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associate ☐ No	ther financial accounts; certificates of			,			

Type of account or

instrument

Date account was

closed, sold,

moved, or

transferred

Last 4 digits of

account number

transfer

Last balance

before closing or

Yes. Fill in the details.

Name of Financial Institution and

Address (Number, Street, City, State and ZIP Code)

	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Bank of America	xxxx-	☐ Checking ☐ Savings ☐ Money Mark ☐ Brokerage ☐ Other Saving		\$0.00
	Bank of America	xxxx-	☐ Checking ■ Savings ☐ Money Mark ☐ Brokerage ☐ Other	Within the last 12 months due to negative balance	\$0.00
21.	Do you now have, or did you have within cash, or other valuables? No Yes. Fill in the details.	1 year before you filed	for bankruptcy, any	safe deposit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code	Who else had a Address (Number State and ZIP Code)	r, Street, City,	Describe the contents	Do you still have it?
22.	Have you stored property in a storage un No Yes. Fill in the details.	it or place other than yo	our home within 1 y	ear before you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code	Who else has of to it? Address (Number State and ZIP Code)	r, Street, City,	Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Cont	ol for Someone Else			
23.	Do you hold or control any property that for someone.	someone else owns? Ir	clude any property	you borrowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the p		Describe the property	Value

Case number (if known)

Part 10: Give Details About Environmental Information

Bonnie L. Stintsman

Debtor 1

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Code)

Debtor 1 Bonnie L. Stintsman Case number (if known)

24.	Has	any governmental unit notified you that	you may be liable or potentially liab	le un	nder or in violation of an environme	ental law?				
		■ No □ Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	and	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of a	ny release of hazardous material?							
		No Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any en	viron	nmental law? Include settlements a	nd orders.				
		No Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case				
Par	t 11:	Give Details About Your Business or C	connections to Any Business							
27.	With	nin 4 years before you filed for bankrupto	y, did you own a business or have a	any o	of the following connections to any	business?				
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
		☐ A partner in a partnership								
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
		■ No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fill i	n the details below for each busine	SS.						
		siness Name dress	Describe the nature of the business	8	Employer Identification number					
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	•	Do not include Social Security number or ITIN. Dates business existed					
28.	With inst	anyone about your business? Inclu	de all financial							
	■ No □ Yes. Fill in the details below.									
	Name Address (Number, Street, City, State and ZIP Code)									

Debtor 1 Bonnie L. Stintsman	Case number (if known)
Part 12: Sign Below	
are true and correct. I understand that	et of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers aking a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Bonnie L. Stintsman	
Bonnie L. Stintsman Signature of Debtor 1	Signature of Debtor 2
Date _July 10, 2025	Date
Did you attach additional pages to <i>You</i> ■ No □ Yes	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone	o is not an attorney to help you fill out bankruptcy forms?
No	, is not an anomo, is not post in our assumance, former

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Bonnie L. Stintsman						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the:	District of New Jersey Camden Vicinage					
Case number (if known)							

Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:							
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
■ 3. The commitment period is 3 years.							
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
10 th	Il in the average monthly income that you received from a 1(10A). For example, if you are filing on September 15, the 6-e 6 months, add the income for all 6 months and divide the tot ouses own the same rental property, put the income from that	month per al by 6. Fi	riod would Il in the re	be March 1 throusult. Do not includ	ıgh Aug le any i	gust 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
					Colur Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and co	mmissio	ons (before all	\$	3,977.05	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	ents from	a spouse if	\$	0.00	\$	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.				r contributions nts, parents,	\$	380.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	- \$ _	0.00					
	Net monthly income from a business, profession, or fa	arm \$ _	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	- \$ _	0.00		_		_	
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

					Column Debtor 1		Column B Debtor 2	or	
7.	Interest, c	lividends, and royalties			\$	0.00	o \$		
8.	Unemploy	ment compensation			\$	0.00	\$		
	the Social	er the amount if you contend that Security Act. Instead, list it here:			r				
	For you		\$	0.00					
_		'	······································						
	benefit und not include United Stadisability, of pay paid undoes not e	or retirement income. Do not income the Social Security Act. Also, any compensation, pension, paytes Government in connection with death of a member of the unifounder chapter 61 of title 10, then intexceed the amount of retired paytender any provision of title 10 other	except as stated in the n	next sentence, do paid by the elated injury or beived any retired the extent that it wise be entitled		0.00	0 _ \$		
	Do not inc received a domestic t United Sta disability,	om all other sources not listed lude any benefits received under is a victim of a war crime, a crime errorism; or compensation, pensites Government in connection with death of a member of the unifor a separate page and put the tot	the Social Security Act; against humanity, or into on, pay, annuity, or allow th a disability, combat-re rmed services. If necess	payments ernational or vance paid by the elated injury or	e				
					\$	0.00	\$		
	_				\$	0.00	\$		
	Т	otal amounts from separate page	s, if any.	4	. \$	0.00	o \$		
	each colur	your total average monthly income. Then add the total for Column termine How to Measure Your I	n A to the total for Colum	in B. \$	4,357.05	+ \$			4,357.05
Part									
12. 13.	Copy you Calculate	r total average monthly income the marital adjustment. Check	from line 11. one:					\$	4,357.05
	You a	are not married. Fill in 0 below.							
	☐ You a	are married and your spouse is fil	ing with you. Fill in 0 belo	ow.					
	Fill in depe Belov adjus	are married and your spouse is not the amount of the income listed indents, such as payment of the sw, specify the basis for excluding thems on a separate page.	n line 11, Column B, that pouse's tax liability or the this income and the amount	e spouse's supp	ort of some	one other	than you or you	ur depend	ents.
	If this	adjustment does not apply, ente		\$					
				+\$					
		Total		\$	0	.00	Copy here=>		0.00
14.	Your cur	rent monthly income. Subtract	line 13 from line 12.					\$	4,357.05
15.		e your current monthly income py line 14 here=>	-	•				\$	4,357.05

Debtor	1	Bonn	ile L. Stintsman		Case number (if known)	
		Mul	tiply line 15a by 12 (the number of months in a	a year).		x 12
	151	o. The	e result is your current monthly income for the y	year for this part of the	form	\$52,284.60
16.	Calc	ulate t	the median family income that applies to yo	u. Follow these steps		
	16a.	Fill in	the state in which you live.	NJ		
	16b.	Fill in	the number of people in your household.	3		
	16c.	To find	the median family income for your state and sized a list of applicable median income amounts, ctions for this form. This list may also be availa	go online using the lin		\$131,173.00
17.	How	do th	e lines compare?			
,	17a.		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NC			
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	ation of Your Dispos		
Part :	3:	Calc	culate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)		
18.	Сор	y your	total average monthly income from line 11	·		\$\$
	cont	end tha	e marital adjustment if it applies. If you are nat calculating the commitment period under 11 come, copy the amount from line 13.			
			marital adjustment does not apply, fill in 0 on lin	ne 19a.		-\$0.00
	19b.	Subtra	act line 19a from line 18.			\$ 4,357.05
		-	your current monthly income for the year. F	·		¢ 4,357.05
	20a.		line 19b			Ψ
		Multip	ly by 12 (the number of months in a year).			x 12
:	20b.	The re	esult is your current monthly income for the yea	ar for this part of the fo	rm	\$ 52,284.60
:	20c.	Copy	the median family income for your state and si	ze of household from	ine 16c	\$ <u>131,173.00</u>
:	21.	How o	do the lines compare?			
			ine 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	e ordered by the court,	on the top of page 1 of this form, chec	k box 3, The commitment
			ine 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise ordered	by the court, on the top of page 1 of thi	is form, check box 4, The
	By s	igning	n Below here, under penalty of perjury I declare that the	e information on this s	tatement and in any attachments is true	e and correct.
X			ie L. Stintsman L. Stintsman			
			of Debtor 1			
I	Date	July MM /	7 10, 2025 7 DD / YYYY			
ı	If yo	u chec	ked 17a, do NOT fill out or file Form 122C-2.			

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter	7 :	Liquidation
9	245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
9	338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY CAMDEN VICINAGE Caption in Compliance with D.N.J. LBR 9004-1(b) Andrew T. Archer, Esq. 125 Route 73 North West Berlin, NJ 08091 856-963-5000 aarcher@spillerarcherlaw.com		
In Re: Bonnie L. Stintsman	Case No.:	
	Chapter: 13	
	Judge:	
DISCLOSURE OF CHAPTER 13 DEBT	TOR'S ATTORNEY COMPENSATION	
that compensation was paid to me within one year before the services rendered or to be rendered on behalf of the debtor(s) Under D.N.J. LBR 2016-5(b), I have agreed to acc to the exclusions listed below, including administrative amount of \$ 4,750.00 . I understand that I must der time of the filing of this disclosure if I seek additional Legal services on behalf of the debtor in connection with Representation of the debtor in: • adversary proceedings, • loss mitigation/loan modification efforts, • post-confirmation filings and matters bro	in connection with this bankruptcy case is as follows: sept for all legal services required to confirm a plan, subject we services that may occur postconfirmation, a flat fee in the monstrate that additional services were unforeseeable at the l compensation and reimbursement of necessary expenses. with the following are not included in the flat fee:	
I have received:	\$ <u>600.00</u>	
The balance due is:	\$ <u>4,150.00</u>	
The balance ■ will □ will not be paid throug	gh the plan.	
□ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the decase, an hourly fee of \$ The hourly fee charged by other members of my firm that may provide s this client range from \$ to \$ I understand that I must receive the Court's approval of any fee expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1.		
I have received:	\$	
2. The source of the funds paid to me was:		
■ Debtor(s) □ Other (specify bel	.ow)	

3.	If a balance is due, the source of future compensation to be paid to me is:				
	■ Debtor(s)	□ Othe	er (specify below)		
	f I have agreed to s	share compensation wi	compensation with another person(s) unless they are members of my law th a person(s) who is not a member of my law firm, a copy of that e compensation is attached.		
prior to	r(s) as needed. If pe	ossible, Debtor's couns otor(s) acknowledge that	ounsel may appear at hearings on their behalf in lieu of counsel retained by sel will advise Debtor(s) of the use of coverage counsel for any hearings at coverage counsel may not be a member of my firm and may or may not		
		/s/ BLS			
		Debtor(s) Initials	Debtor(s) Initials		
		needed. All appearance	coverage counsel may appear at hearings on their behalf in lieu of counsel es related to the Debtor(s) matter will be made by me, the undersigned		
		Debtor(s) Initials	Debtor(s) Initials		
6.	The Debtor(s) ha	ve reviewed this Discl	osure and it is consistent with the terms of the Retainer Agreement.		
Date:	July 10, 2025		/s/ Bonnie L. Stintsman		
			Bonnie L. Stintsman Debtor		
Date:					
Dute.			Joint Debtor		
Date:	July 10, 2025		/s/ Andrew T. Archer, Esq.		
	,		Andrew T. Archer, Esq.		
			Debtor's Attorney		

United States Bankruptcy Court District of New Jersey Camden Vicinage

In re	Bonnie L. Stintsman		Case No.		
		Debtor(s)	Chapter	13	
VERIFICATION OF CREDITOR MATRIX					
The ab	ove-named Debtor hereby verifies that	at the attached list of creditors is true and con	rrect to the best	of his/her knowledge.	
Date:	July 10, 2025	/s/ Bonnie L. Stintsman			
		Bonnie L. Stintsman			
		Signature of Debtor			

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Amex Correspondence/Bankruptcy Po Box 981535 El Paso, TX 79998

Apothaker Scian PC PO Box 5496 Mount Laurel, NJ 08054

AT&T Mobility PO Box 537104 Atlanta, GA 30353

Avant Attn: Bankruptcy Po Box 9183380 Chicago, IL 60691

Bank of America Attn: Bankruptcy Nc4-105-03-14 Pob 26012 Greensboro, NC 27410

Bank of America Attn: Bankruptcy 4909 Savarese Circle Tampa, FL 33634

Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cavalry Portfolio Services Attn: Bankruptcy 1 American Lane, Ste 220 Greenwich, CT 06831 Cavalry Spv I, LLC PO Box 4252 Greenwich, CT 06831

Chase Card Services Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850

Comenity Bank PO Box 182125 Columbus, OH 43218

Cooper Health System PO Box 6018 Bellmawr, NJ 08099

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

Firstsource Advantage LLC 205 Bryant Woods South Amherst, NY 14280

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Jefferson Capital Systems, LLC 1355 S. Colorado Blvd., Ste 400, Bldg C Denver, CO 80222

Midland Credit Management Attn: Bankruptcy PO Box 939069 San Diego, CA 92193

Mullooly Jeffrey Rooney & Flynn LLP 6851 Jericho Tpke, Ste 220 Syosset, NY 11791

NJHFMA 637 S Clinton Ave Trenton, NJ 08611

Pressler, Felt & Warshaw, LLP 7 Entin Rd. Parsippany, NJ 07054

Radius Global Solution Attn: Bankruptcy 7931 Glenroy Rd, Ste 250 Edina, MN 55439

Sage Capital Recovery 401 Minnetonka Rd Hi-Nella, NJ 08083

State Of New Jersey PO Box 283 Trenton, NJ 08602

U.S. Department of Housing and Urban Dev 451 7th Street, S.W. Washington, DC 20410

United Wholesale Mortgage Attn: Bankruptcy 585 South Boulevard East Pontiac, MI 48341

Virtua Health 2000 Crawford Place Suiite 100 Mount Laurel, NJ 08054

Weinberger Divorce & Family Law Group 1000 Atrium Way, Suite 402 Mount Laurel, NJ 08054